SCC eFile 2013 ANNUAL REPORT 213557244 COMMONWEALTH OF VIRGINIA STATE CORPORATION COMMISSION						
1.) CORPORATION NAME:			DUE DATE	: 12/31/2013		
Crown Financial Ministries, Inc.						
2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: CORPORATE CREATIONS NETWORK INC. 4445 CORPORATION LANE, 2ND FLOOR VIRGINIA BEACH, VA			SCC ID NO: F1495029			
			5.) STOCK CLASS	INFORMATION AUTHORIZED		
3.) CITY OR COUNTY OF VA REG VIRGINIA BEACH CITY	ISTERED OFFICE:					
4.) STATE OR COUNTRY OF INCO	DRPORATION:					
6.) PRINCIPAL OFFICE ADDRESS:						
ADDRESS: 1035 OL	D PEACHTREE ROAD NW					
CITY/ST/ZIP: LAWRENCEVILLE, GA 30043						
7.) DIRECTORS AND PRINCIPAL C		nd prin nated	ncipal officers must as both a director a	be listed. An individual nd an officer.		
NAME:	DODERT BIOKIE III	Х	OFFICER	DIRECTOR		
TITLE:	ROBERT DICKIE III PRESIDENT					
ADDRESS: CITY/ST/ZIP/CO:	1035 OLD PEACHTREE ROAD I LAWRENCEVILLE, GA 30043	W				
	. ,	Х	OFFICER	DIRECTOR		
NAME:	SHEILA THOMPSON		-			
TITLE: ADDRESS:	VICE PRESIDENT 1035 OLD PEACHTREE ROAD I	NW				
CITY/ST/ZIP/CO:	LAWRENCEVILLE, GA 30043					
		Х	OFFICER	X DIRECTOR		
NAME: TITLE:	JACK ALEXANDER SECR/TREAS					
ADDRESS:	1035 OLD PEACHTREE ROAD	٧W				
CITY/ST/ZIP/CO:	LAWRENCEVILLE, GA 30043					
NAME.	TO.4 B.	Х	OFFICER	X DIRECTOR		
NAME: TITLE:	TOM DARDEN CHAIRMAN					
ADDRESS:	1035 OLD PEACHTREE ROAD I	٧W				
CITY/ST/ZIP/CO:	LAWRENCEVILLE, GA 30043					
NAME:	CHARLEC II DENTLEVII	X	OFFICER	DIRECTOR		
TITLE:	CHARLES H. BENTLEY II CEO					
ADDRESS:	1035 OLD PEACHTREE ROAD	٧W				
CITY/ST/ZIP/CO:	LAWRENCEVILLE, GA 30043		7			
NAME:	CTEDLENI DANITINI	Х	OFFICER	DIRECTOR		
TITLE:	STEPHEN PANTIN CFO					
ADDRESS: CITY/ST/ZIP/CO:	1035 OLD PEACHTREE ROAD I LAWRENCEVILLE, GA 30043	NW				

NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	PAUL BAGNOLI DIRECTOR 1035 OLD PEACHTREE ROAD N LAWRENCEVILLE, GA 30043	OFFICER	X DIRECTOR		
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	CHUCK BENTLEY DIRECTOR 1035 OLD PEACHTREE ROAD N LAWRENCEVILLE, GA 30043	OFFICER	X DIRECTOR		
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	RAYMOND HARRIS DIRECTOR 1035 OLD PEACHTREE ROAD N LAWRENCEVILLE, GA 30043	OFFICER	X DIRECTOR		
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	DARYL J. HEALD DIRECTOR 1035 OLD PEACHTREE ROAD N LAWRENCEVILLE, GA 30043	OFFICER	X DIRECTOR		
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	JIM SHOEMAKER DIRECTOR 1035 OLD PEACHTREE ROAD N' LAWRENCEVILLE, GA 30043	OFFICER	X DIRECTOR		
I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.					
/s/ JACK ALEXANDER SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	JACK ALEXANDER, SECR / PRINTED NAME AND CORPO		1/25/2013 DATE		
It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.					